nside this box - > + Patent and Trademan

ice: U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95	U.S. Department of C Patent and Tradem		Attorney (	Docket	9793/035						
DECL	First Nam	ned	Gerber, Martin								
DEGL	AIVATION		COMPLETE IF KNOWN								
Declaration	OR Declaration		Application	n Number	Unknown						
Submitted With Initial Filing	Submitted aft Initial Filing	er	Filing Dat		Herewith						
			Group Art	t Unit	Unknown	nknown					
			Examiner	Name	Unknown						
As below named inventor, I hereby declare that:  My residence, post office address, and citizenship are as stated below next to my name.											
i believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
SUBCUTANEOUS ANALYTE SENSOR											
(Title of the Invention)											
the specification of which  is attached hereto											
OR											
was filed on (MWDD/YYYY) as United States Application Number or PCT International Application Number											
	and was a	mended on (MM/DD/	mm [			(if applica	ble)				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56  I hereby claim foreign priority benefits under Title 35, United States Code § 19(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.											
			]			0					
Prior Foreign Application Number(s)	Country	Foreign Filin (MM/D/Y		Priority No	t Claimed	Copy Attached?					
						YES	NO ————————————————————————————————————				
None											
					]						
Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:											
I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below											
Application Number(s	Filing Date (MWDD/Y	ΥΥ)	Additional provisional								
None			application numbers are listed on a supplemental priority sheet attached hereto.								

DECLARATION							ge 2						
I hereby claim the binternational applica claims of this applications paragraph of T patentability as defiprior application and	ation designating cation is not disck itle 35, United Str ned in Title 37, C	the Unite osed in that stes Cod ode of Fo	d States re prior e § 112, ederal R	s of Am United : , I ackno legulation	erica, lis States o owledge ons § 1.	ited bel r PCT I the du 56 whice	low and, ir Internatior ty to disck ch became	nsofar as th nal applicat ose informa	ne subjec ion in the ation whic	t matter manner ch is mat	of each o provided erial to	if the I by the	
prior application and the national or PCT international fit U.S. Parent Application PC					rent		Pa	Parent Filling Date			Parent Patent Number		
					Number			(MM/DD/YYYY)			(if applicable)		
							-						
	al U.S. or PCT in								. "				
As a named inventor	or, I hereby appoi	nt the foli cted ther	owing a ewith:	ttorney(	(s) and/o	r agent	t(s) to pro	secute this	applicati	ion and t	o transac	t all business in the	
Firm Name						one	)	Payor Number (if applicable)					
Name						tration nber		Name				Registration Number	
Lawrence A. Steward						809							
David H. Badger						97							
Dean E. McConnell					44,9	916							
Sanders N.	Sanders N. Hillis												
A. James Richardson					26,9	183							
Addition	al attorney(s) and	or agent	(s) nam	ed on a	supple	nental	sheet atta	ched heret	0.				
☑ Please direct	La	wrer	nce A.	Stewar	ď								
Address	BRINKS I	HOFE	R GI	LSO	N&L	ION	E						
Address							•						
Address One Indiana Square, Sui  City Indianapolis								ndiana	liana ZIP			46204-2033	
Country	LL C A Telephone				317-636-0886 Fax 31			317-	17-634-6701				
I hereby declare the are believed to be to made are punishable false statements m	at all statements i rue, and further to ble by fine or impr	hat these isonmen	stateme	ents we h, under	re made r Section	with the	ne knowle of Title 18	dge that wi 3 of the Uni	liful false	stateme	nts and ti	he like so	
Name of Sole or Fire								s been filed	for this u	nsigned in	ventor.		
Given Martin Middle Initial					Family Name		Gerber				ffix		
Inventor's Signature									Date				
RESIDENCE: City Indianapolis St					e IN	1	Country	US		Cit	izenship		
POST OFFICE ADD	RESS	91151	lague R	load									
City Indianapolis State IN				ZIP 4625			Country				plicant thority		
✓ Addition	al inventors are b	oing par	od on c	upplom	ental ch	oot(e)	attached t	noreto.					

OUSTELL BIRGH

	DECLARATION						ALDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:							A petition has been filed for this unsigned inventor.					
Given Name			Middle Initial		Family Name	Essenpreis			Suffix			
Inventor's Signature						Date						
RESIDENCE: City Berkeley				State	CA	Country US			Citizenshlp			
POST OFFICE ADDR	RESS	r <sup>th</sup> Street										
City [	Berkeley	State	CA	ZIP	94710	Country	ountry US		Applicant Authority			
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor.												
Given Name	Wolfgang		Middle Initial		Family Name	Petrich			Suffix			
Inventor's Signature							Date					
RESIDENCE: City	Unknown			State		Country			Citizenship			
POST OFFICE ADDR	RESS											
City		State		ZIP		Country			Applicant Authority			
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor.												
Given Name			Middle Initial		Family Name				Suffix			
Inventor's Signature						Date						
RESIDENCE: City				State		Country			Citizenship			
POST OFFICE ADDR	RESS											
City		State		ZiP		Country			Applicant Authority			
Name of Additional Ju	oint Inventor, if any	:		[		A petition ha	as been filed fo	or this unsigne	d inventor.			
Given Name	Middle Initial				Family Name							
Inventor's Signature						Date						
RESIDENCE: City				State		Country			Citizenship			
POST OFFICE ADDRESS												
City		State		ZIP		Country			Applicant Authority			
Name of Additional Joint Inventor, if any:  A petition has							etition has been filed for this unsigned inventor.					
Given Name			Middle Initial		Family Name				Suffix			
Inventor's Signature							Date					
RESIDENCE: City				State		Country			Citizenship			
POST OFFICE ADDR	RESS											
City		State		ZIP		Country			Applicant Authority			
Additional inventors are being named on supplemental sheet(s) attached hereto.												